

This Form is for INTERNAL PTO USE ONLY  
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NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)

APPLICATION NUMBER: 09/500512

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	= Total
Basic Filing Fee	<u>201/101</u>					
Total Claims >20	<u>203/103</u>	<u>32</u>	.20 =	<u>12</u>	X	<u>690</u> = <u>690</u>
Independent Claims >3	<u>202/102</u>	<u>3</u>	.3 =	<u>—</u>	X	<u>18</u> = <u>216</u>
Multi Dep Claim Present	<u>204/104</u>					
Surcharge	<u>205/105</u>					
English Translation	<u>139</u>					

TOTAL FEE CALCULATION 1036

Fees due upon filing the application:

Total Filing Fees Due = \$ 1036.00

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 1036.00

Heddy Tadie  
Office of Initial Patent Examination

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 29, 1999

Application or Docket Number

09/500512

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

SMALL ENTITY

TYPE

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	32 minus 20= * 12	
INDEPENDENT CLAIMS	3 minus 3 = * —	
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEES	RATE	FEES
	345.00		690.00
X\$ 9=		X\$18=	216
X39=		X78=	
+130=		+260=	
TOTAL		TOTAL	906

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OTHER THAN  
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	** 32	= 2
Independent	*	3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total		**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.